

THERESA CERULLI, M.D.

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Schedule of Fees and Conditions

1. You, as the hiring attorney, are my client. You are responsible for the payment of fees outlined below, regardless of what third parties are involved or the outcome of the case.
2. Case Evaluation including Medical Records Review, Deposition Review, Investigation, Research, Counseling, Deposition Preparation, Deposition Testimony, Trial Preparation, Oral and Written Reports or any miscellaneous task as requested by client or opposing counsel is billed at \$400.00/hr. Fees are billed to the client in fifteen minute increments with a minimum charge of fifteen minutes.
3. If I am scheduled for a deposition, meetings, or court testimony requiring travel, rates will be billed by the half day at \$1,800 or full day at \$3,500 for any time held for this case outside of my regular clinical office practice.
4. If I am scheduled for a deposition, meeting, or court testimony and the case is settled or delayed, my fees for the time you asked me to set aside from my medical practice for such events remain as stated above. Clients can avoid charges for events that require rescheduling or cancellation by notifying me verbally and in writing at least 10 business days in advance.
5. All travel expenses shall be paid by client attorney, including hotel accommodations and airline tickets. Travel and actual expenses reasonably and necessarily incurred such as meals, lodging, telephone charges, the cost of reproducing documents and materials, are additional to the consulting fee and will be billed to the client attorney at cost. Travel by car is at the rate of 57 cents/mile.
6. If the opposing attorney is designated to pay deposition costs and fails to pay them, you the client attorney are responsible for the bill.
7. Balances for work completed will be billed monthly. Payment is due within 30 days from date of invoice.
8. Accounts over thirty days past due show accrued interest of 10% per month.
9. Payment shall be made payable to: Theresa Cerulli, and mailed to: Theresa Cerulli, M.D., 451 Andover St. Suite 130, North Andover, MA 01845

10. Theresa Cerulli, M.D. reserves the right to suspend all work and refuse delivery of further services until outstanding balances over thirty days past due are paid in full.
11. If client fails to pay an outstanding balance over thirty days past due, client will pay all reasonable costs, including any attorney fees incurred by Dr. Cerulli, in collecting the outstanding balance.
12. The hiring attorney must inform Dr. Theresa Cerulli of any Daubert hearings scheduled for the case.

I acknowledge that I have read the above Fee Schedule and terms of payment to Theresa Cerulli, M.D. for services of Expert Medical Review. I agree that I find the fees and terms acceptable and understand that my firm is responsible for payment.

Attorney Signature
Law Firm Represented

Date

Case Name

Case Number